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BIBDATASHEET

CONFIRMATION NO. 6133

Bib Data Sheet

SERIAL NUMBER 09/436,092	FILING DATE 11/08/1999 RULE	CLASS 451	GROUP ART UNIT 3723	ATTORNEY DOCKET NO. 043290.P3955
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APPLICANTS

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** CONTINUING DATA *****

None SLW

** FOREIGN APPLICATIONS *****

None SLW

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 12/07/1999

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	<i>SLW</i> Examiner's Signature	Initials	3	27	6

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TITLE

POLISH PAD WITH NON-UNIFORM GROOVE DEPTH TO IMPROVE WAFER POLISH RATE UNIFORMITY

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
RECEIVED		

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